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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/002,842	11/14/2001	James Hunter Boone	TLAB.79219	3654
5251 7:	590 09/29/2005		EXAM	INER
SHOOK, HARDY & BACON LLP			COOK, LISA V	
2555 GRAND KANSAS CIT	BLVD Y,, MO 64108		ART UNIT	PAPER NUMBER
			1641	

DATE MAILED: 09/29/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

	1					
	Application No.	Applicant(s)				
	10/002,842	BOONE ET AL.				
Office Action Summary	Examiner	Art Unit				
	Lisa V. Cook	1641				
The MAILING DATE of this communication ap Period for Reply	opears on the cover sheet w	ith the correspondence address				
A SHORTENED STATUTORY PERIOD FOR REPI WHICHEVER IS LONGER, FROM THE MAILING [- Extensions of time may be available under the provisions of 37 CFR 1, after SIX (6) MONTHS from the mailing date of this communication If NO period for reply is specified above, the maximum statutory period - Failure to reply within the set or extended period for reply will, by stature to reply received by the Office later than three months after the mailing earned patent term adjustment. See 37 CFR 1.704(b).	DATE OF THIS COMMUNI. 136(a). In no event, however, may a divill apply and will expire SİX (6) MO te, cause the application to become A	CATION. reply be timely filed NTHS from the mailing date of this communication. BANDONED (35 U.S.C. § 133).				
Status						
1) Responsive to communication(s) filed on 25.	<i>July 2005</i> .					
2a)⊠ This action is FINAL . 2b)□ Thi	This action is FINAL . 2b) This action is non-final.					
closed in accordance with the practice under	Ex parte Quayle, 1935 C.I	D. 11, 453 O.G. 213.				
Disposition of Claims						
4) ☐ Claim(s) 1-9,12 and 14-16 is/are pending in the day of the above claim(s) is/are withdrays. 5) ☐ Claim(s) is/are allowed. 6) ☐ Claim(s) 1-9, 12 and 14-16 is/are rejected. 7) ☐ Claim(s) is/are objected to. 8) ☐ Claim(s) are subject to restriction and/	awn from consideration.					
Application Papers						
9) The specification is objected to by the Examin 10) The drawing(s) filed on is/are: a) ac Applicant may not request that any objection to the Replacement drawing sheet(s) including the correct 11) The oath or declaration is objected to by the E	cepted or b) objected to e drawing(s) be held in abeya ction is required if the drawing	nce. See 37 CFR 1.85(a). g(s) is objected to. See 37 CFR 1.121(d).				
Priority under 35 U.S.C. § 119						
12) Acknowledgment is made of a claim for foreig a) All b) Some * c) None of: 1. Certified copies of the priority document 2. Certified copies of the priority document 3. Copies of the certified copies of the priority application from the International Bureat * See the attached detailed Office action for a list	nts have been received. Its have been received in a point of documents have been au (PCT Rule 17.2(a)).	Application No n received in this National Stage				
Attachment(s)	•					
Notice of References Cited (PTO-892)		Summary (PTO-413) s)/Mail Date				
 Notice of Draftsperson's Patent Drawing Review (PTO-948) Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08 Paper No(s)/Mail Date 		Informal Patent Application (PTO-152)				

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Application/Control Number: 10/002,842 Page 2

Art Unit: 1641

DETAILED ACTION

Response to Notice of Non-responsive Amendment

1. Applicants response and amendments faxed 7/25/05 is acknowledged. The corrected amendment has obviated the notice of informal or non-responsive amendments of record.

Amendment Entry

- 2. Applicant's amendment faxed 7/25/05 has modified claims 12 and 14. Claims 10-11, 13 and 17-20 were cancelled. Currently claims 1-9 and 12-16 are pending and under consideration.
- 3. Objections and/or rejections of record not reiterated below have been withdrawn.

REJECTIONS MAINTAINED

Applicant has not addressed the following objection regarding the IDS therefore it is maintained.

Information Disclosure Statement

- 4. The listing of references in the specification is not a proper information disclosure statement. 37 CFR 1.98(b) requires a list of all patents, publications, or other information submitted for consideration by the Office, and MPEP § 609 A(1) states, "the list may not be incorporated into the specification but must be submitted in a separate paper." Therefore, unless the examiner on form PTO-892 or applicant on PTO-1449 has cited the references they have not been considered.
- 5. The information disclosure statement filed 4/26/03 in paper #6 has been considered as to the merits before First Action.

Page 3

Application/Control Number: 10/002,842

Art Unit: 1641

Claim Rejections - 35 USC § 103

- 6. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:
 - (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

This application currently names joint inventors. In considering patentability of the claims under 35 U.S.C. 103(a), the examiner presumes that the subject matter of the various claims was commonly owned at the time any inventions covered therein were made absent any evidence to the contrary. Applicant is advised of the obligation under 37 CFR 1.56 to point out the inventor and invention dates of each claim that was not commonly owned at the time a later invention was made in order for the examiner to consider the applicability of 35 U.S.C. 103(c) and potential 35 U.S.C. 102(e), (f) or (g) prior art under 35 U.S.C. 103(a).

I. Claims 1-5 are rejected under 35 U.S.C. 103(a) as being unpatentable over by Sugi et al. (The American Journal of Gastroenterology, Vol.91, No.5, 927-934, 1996).

Sugi et al. disclose that lactoferrin (LF) levels were elevated in fecal samples of patients with inflammatory bowel disease. The extracellular (endogenous) release of LF was the most efficient and stable inflammation maker found in feces. See abstract. LF was taught to be a superior maker for intestinal inflammation.

Specifically, LF was elevated in inflammatory bowel disease like active ulcerated colitis - UC and Crohn's disease - CD patients when compared to control subjects. See page 930, Table 1 and page 932, 1st column.

Mucosal measurements of LF in patients with inflammatory bowel disease (IBD) were also conducted to further characterize Lf as a marker (claim 4). See page 931 Discussion.

Lactoferrin concentrations were detected via an ELISA assay. The samples were diluted from 100- to 10,000 fold in 0.1M Tris-HCl buffer before testing (claims 2 and 3). A color (qualitative) reaction was measured at 510/630nm (claim 5). See page 928 2nd column 3rd paragraph.

Sugi et al. teach elevation of lactoferrin in inflammatory diseases. Although, Sugi et al. are silent with respect to non-inflammatory diseases, this is an obvious modification of the method determining wherein elevated lactoferrin is indicative of <u>inflammatory</u> disorders, thus this same elevation would preclude the diagnoses of <u>non-inflammatory</u> etiologies such as irritable bowel syndrome (IBS).

It would have been prima facie obvious to one of ordinary skill in the art at the time the invention was made to preclude the determination of non-inflammatory diseases like IBS with the detection of elevated LF in the test sample, because Sugi teaches LF association with inflammatory disease, therefore one could conclude that if LF is elevated then IBS and other non-inflammatory etiologies would be ruled out.

II. Claims 6-9, 12, and 14-16 are rejected under 35 U.S.C. 103(a) as being unpatentable over Sugi et al. (The American Journal of Gastroenterology, Vol.91, No.5, 927-934, 1996) of Peen et al. (Gut, 1993, 34, 56-62).

Please see Sugi et al. as set forth above.

Sugi et al. differ from the instant invention in not specifically teaching the utility of polyclonal antibodies at an optical density measurement of 450nm and greater that .200 in their assay procedures.

However, Pene et al. teach ELISA procedures measuring lactloferrin with these parameters. See page 57-58. Pene et al. employed polyclonal rabbit anti-human lactoferrin from Sweden (claim 6). See page 58 Rabbit Anti-Lactoferrin Antisera. In the assay, plates were coated with the antigen and samples (antibody bound sample).

The bound complex was then exposed to alkaline-phosphatase conjugated rabbit human antibodies (enzyme linked antibody). The enzyme linked antibody bound sample complex was measured at 405nm at 1.0 (greater than 0.2). See page 57, 2nd column ELISA.

With respect to the optical density measurement being 450nm, this is deemed routine adjustment for optimizing the assays taught by Sugi et al. in view of Pene et al. Absent evidence to the contrary this detection parameter is routine optimization. This routine optimization position is supported by the instant disclosure on page 11 lines 14-20.

Application/Control Number: 10/002,842

Art Unit: 1641

It would have been prima facie obvious to one of ordinary skill in the art at the time the invention was made to measure lactoferrin with polyclonal antibodies, at an optical density measurements at 450nm, greater that .200 as taught by Peen et al. in the method of Sugi et al. because Peen et al. taught that their method was quick and accurate. See Figure 1 and page 59 2nd column.

Response to Arguments

In response to applicant's argument that the references fail to show certain features of applicant's invention, it is noted that the features upon which applicant relies (i.e., precluding a diagnosis of irritable bowel syndrome and other non-inflammatory etiologies if a sample does not contain an elevated level of endogenous lactoferrin) are not recited in the rejected claim(s). The instant claims are drawn to a method detecting a sample containing an elevated level of lactoferrin. Please see claim 1 lines 5-6 and claim 12 lines 15-16. Although the claims are interpreted in light of the specification, limitations from the specification are not read into the claims. See *In re Van Geuns*, 988 F.2d 1181, 26 USPQ2d 1057 (Fed. Cir. 1993).

Applicant contends that the reference to Sugi et al. merely teach the use of fecal lactoferrin as a marker for disease activity in inflammatory bowel disease but does not teach or suggest substantially precluding (to make unnecessary or rule out in advance) a diagnosis of irritable bowel syndrome and other non-inflammatory etiologies.

This argument was carefully considered but not found persuasive because the claims do not require the detection of irritable bowel syndrome and other non-inflammatory etiologies. The claims merely read on the detection of elevated levels of endogenous lactoferrin in a sample to substantially preclude a diagnosis of irritable bowel syndrome and other non-inflammatory etiologies. Sugi et al. disclose this limitation because elevated levels of lactoferrein were correlated to inflammatory bowel disease and a patient with inflammatory bowel disease would presumably not have irritable bowel syndrome and other non-inflammatory etiologies.

Accordingly, a diagnosis of irritable bowel syndrome and other non-inflammatory etiologies is substantially precluded.

Further, a reference is not limited to its working examples, but must be evaluated for what it teaches those of ordinary skill in the art. *In re Boe*, 355 F.2d 961, 148 USPQ 507 (CCPA 1966). *In re Chapman*, 357 F.2d 418, 148 USPQ 711 (CCPA 1966). Also Sugi et al. teach the measurement of the same maker (lactoferrin), which is capable of performing the claimed function (preclude non-inflammatory etiologies). Performing a function is not a positive limitation but only requires the ability to so perform. It does not constitute a limitation in any patentable sense. *In re Hutchison*, 69 USPQ 138.

Applicant contends that Sugi et al. do not detect IBS (irritable bowel syndrome), however the claims do not require the detection of IBS. In response to applicant's argument that the references fail to show certain features of applicant's invention, it is noted that the features upon which applicant relies (i.e., IBS - irritable bowel syndrome detection) are not recited in the rejected claim(s). The instant claims merely recite that IBS is precluded.

Although the claims are interpreted in light of the specification, limitations from the specification are not read into the claims. See *In re Van Geuns*, 988 F.2d 1181, 26 USPQ2d 1057 (Fed. Cir. 1993).

Applicant contends that the references do not teach or suggest the preclusion of non-inflammatory etiologies. Although the references teach the measurement of elevated lactoferrin in inflammatory diseases, they are silent with respect to non-inflammatory disorders. This argument was carefully considered but not found persuasive because Sugi et al. disclose the measurement of elevated lactoferrin as a marker for inflammatory disorders. Therefore the maker for inflammatory diseases would obviously preclude (rule out in advance) the detection of non-inflammatory events.

Applicant contends that the reference of Peen et. al. (1993) teaches the detection of lactoferrin in serum samples not in fecal samples. Applicant further contends that Peen et al. detects the presence of anti-lactoferrin human immunoglobulins, not endogenous lactoferrein. This argument was carefully considered but not found persuasive because the Peen et al. reference was not relied on for teaching fecal lactoferrin measurement. Sugi et al. are cited in combination with Peen et al. and Sugi et al. disclose fecal lactoferrin measurements.

With respect to Peen et al. only detecting anti-lactoferrin human immunoglobulins, it is noted that Peen et al. teach the detection of a complex formed between anti-lactoferrin human immunoglobulins and endogenous lactoferrin. See Peen et al. page 57 2nd column ELISA. Wherein human lactoferrin solutions were incubated in microtiter plates and subsequently detected. See Peen et al. page 58 1st column Western Blotting.

While a deficiency in a reference may overcome a rejection under 35 USC 103, a reference is not overcome by pointing out that a reference lacks a teaching for which other references are relied. In re Lyons, 364 F.2d 1005, 150 USPQ 741, 746 (CCPA 1966). Both Sugi et al. and Peen (1993) disclose elevated lactoferrin in inflammatory disorders and therefore they necessarily preclude the measurement on non-inflammatory disease.

Applicant argues that Sugi et al. measure color development at 510/630nm and Peen et al. (1993) measure the enzyme bound antibody sample at 405nm. While the claims require detection at 450nm to determine lactoferrin elevation in fecal samples.

This argument was carefully considered but not found persuasive because the specification teaches optical density detection as an adjustable parameter in order to optimize the assay. See page 11 lines 14-20. Applicant has not shown evidence of unexpected results with the 450nm detection over the wavelength measurements taught by Sugi et al. and Peen et al. (1993). It is well established that merely selecting proportions and ranges is not patentable absent a showing of criticality. *In re Becket*, 33 USPQ 33 (CCPA 1937). *In re Russell*, 439 F.2d 1228, 169 USPQ 426 (CCPA 1971).

- 8. For reasons aforementioned, no claims are allowed.
- 9. THIS ACTION IS MADE FINAL. Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the mailing date of this final action.

Remarks

- 10. Prior art made of record and not relied upon is considered pertinent to the applicant's disclosure:
- A. Pool et al. (Gut, 1993, 34, 46-50) teach ELISA techniques to measure autoantibodies involved in inflammatory bowel disease.
- B. Guerrant et al. (US Patent #5,124,252) teach in vitro fecal tests to measure lactoferrin.
- 11. Papers related to this application may be submitted to Group 1600 by facsimile transmission. Papers should be faxed to Group 1600 via the PTO Fax Center located in Crystal Mall 1. The faxing of such papers must conform to the notice published in the Official Gazette, 1096 OG 30 (November 15, 1989). The Group 1641 Central Fax number is (571) 273-8300, which is able to receive transmissions 24 hours/day, 7 days/week. In the event Applicant would like to fax an unofficial communication, the Examiner should be contacted for the appropriate Right Fax number.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Lisa V. Cook whose telephone number is (571) 272-0816. The examiner can normally be reached on Monday - Friday from 7:00 AM - 4:00 PM.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Long Le, can be reached on (571) 272-0823.

Any inquiry of a general nature or relating to the status of this application should be directed to the Group TC 1600 whose telephone number is (571) 272-1600.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR.

Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

Lisa V. Cook

Remsen 3C-59

571-272-0816

9/21/05

LUNG V. LE

SUPERVISORY PATENT EXAMINER

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